

POSITION	ID NO.	DATE
CLASSIFIER	5-1	
EXAMINER	230	7-15
TYPIST	333	7-25-77
VERIFIER	333	
CORPS CORR.		
SPEC. HAND	33-5	6-28-77
FILE MAINT.	316	3-27-97
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
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SYMBOLS
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 ✗ (Through numbers) Rejected
 N Restricted
 I Non-acting
 A Appeal
 O Rejected

Claim	Final	Original	Date
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